1,12									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000										09/677363				
CLAIMS AS FILED - PART I (Column 1) (Column 2)									EN	ITITY	OR	OTHER SMALL		
то	TAL CLAIMS							RATI	Ε	FEE	1	RATE	FEE	
FOR			NUMBER F	LED	NUMBER EXTRA			BASIC	FEE	355.00	OR	Basic Fee	710.00	
TOTAL CHARGEABLE CLAIMS			22 minus 20=		2			X\$ 9=		OR	X\$18=			
IND	EPENDENT CL	AIMS	2 min	us 3 =	•			X40=			OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					=	-	OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in col						olumn 2		TOTA	ĭL.		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMA		ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUN PREVI	HEST BEA OUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 20	Minus	- J	2	£		X\$ 9	=		OR	X\$18=		
MEN	Independent	· 2	Minus			-		X40	=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135			OR	+270=		
									TAL			TOYAL		
٠		(Column 1) (Column 2) (Column 3)							FEE	L	JOR	ADDIT. FEE		
	2000 - 100 -	(Column 1) CLAIMS	\$5745EX		HEST	(Column 3)	ነ		-	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RAT	E	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 18	Minus	••	<u>Σ</u> ο	=		X\$ 9	)=		OR	X\$18=		
	Independent	• 2 NTATION OF N	Minus	es (	2	-		X40	=		OR	X80=		
╠	PIHOI PHESE	MIAHUN UP N	RULTIFLE DEF	CHUEN	CLAIM		j	+135	5=		OR	+270=		
									TAL		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)										_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER MOUSLY O FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	**		=	_	X\$ 9	}=		OR	X\$18=		
	Independent	•	Minus	***		2	]	X40	) <u> </u>			X80=		
الآ	FIRST PRESE	NTATION OF N	NULTIPLE DE	PENDEN	IT CLAIM		J		_	<del>                                     </del>	OR	<b></b>		
+135=											OR	+270=		
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
•	"If the "Highest Nu The "Highest Nur	imber Previously mber Previously P	Paid For" (N THI Paid For" (Total o	S SPACE r Indepen	: is less the ident) is the	an 3, enler 3." e highest numb	er fo	ound in th	ne ap	propriate bo	x in c	olumn 1.		

FORM PTO-875 (Rev. 6/00)